Illinois Governor Releases Drug Importation Study; NABP, FDA Question Credibility

Despite the inclusion of language that limits importation of prescription medication in the recently signed-into-law Medicare Act of 2003 and the risks associated with this practice, several state legislators still strive to incorporate importation into their state employee prescription benefits. Illinois Governor Rod R. Blagojevich is one such politician who is active in the fight for the legalization of prescription drug importation. Since July 2003, Blagojevich has held numerous press conferences, lobbied at Capitol Hill, launched an “informational” Web site with a petition for legalization of importation, and commissioned a study to determine the benefits and safety of creating a program for state employees to purchase prescription medication from Canada. Despite admonitions by NABP and Food and Drug Administration (FDA) about the safety of such a program, Blagojevich continues to lobby for changes in federal law.

Currently, Illinois spends about $340 million a year on prescription drugs for its employees and retirees and $1.8 billion for all the state’s health programs. Blagojevich contends that the state could set up an importation system with safety checks equal to or greater than Illinois’ current pharmaceutical system and achieve savings of up to $90.7 million. According to the six-week study performed by Blagojevich’s staff, purchasing prescription drugs from Canada is as safe as, if not safer, than purchasing drugs in Illinois. This statement originated from the following claims of the study:

■ The Canadian regulatory system provides health and safety protections that are substantially equivalent to those provided in the state of Illinois.

(continued on page 2)
Illinois Releases Importation Study; NABP, FDA Question Credibility

(continued from page 1)

- Drugs sold in Canadian pharmacies are manufactured in facilities approved by Health Canada (the country’s main agency responsible for its drug safety).
- Though not identical in statutory and regulatory text, both countries’ methods of ensuring safety and efficacy of prescription drugs are comparable.
- The United States and Canada have comparable requirements at virtually every level for the warehousing and storage of pharmaceuticals.
- The educational requirements for licensed pharmacists in the Canadian provinces visited—Ontario and Manitoba—are as rigorous as those of Illinois.
- The professional regulation of pharmacists in Ontario and Manitoba appears to be as rigorous as professional regulation of pharmacists in Illinois.
- Reporting of incidents involving internal process errors was more rigorous in Manitoba and Ontario than in Illinois.
- Canadian pharmacies fill prescriptions in amounts supplied by the manufacturer in sealed containers only. They do not open manufacturer-supplied containers, count, and repackage to fill the prescription as done in the US, providing an added safety measure.

FDA Responds to Study

However, FDA found many inaccuracies and inadequate fact-finding practices in the study that severely diminish the study’s claims. Not only were math errors present that reduced the much-acclaimed cost savings, but FDA noted that the study based medication costs on drugs packaged in 100-unit quantities instead of unit-of-use containers; increased shipping costs ($12 from Canada to the US) were not factored into the cost.

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NAPRA Launches VIPPS Canada

(continued from page 1)

bodies, the Canadian Association of Chain Drug Stores, and the Canadian Pharmacists Association.

According to a November 20, 2003 NAPRA press release, NAPRA President Lois Cantin stated, “The VIPPS program and VIPPS Seal of Approval will provide a convenient way for consumers to identify legitimate Canadian pharmacies offering services through the Internet, and we are pleased to present this quality program to help protect the Canadian public.”

VIPPS Canada pharmacies must successfully complete the same rigorous inspection that United States VIPPS applicants voluntarily complete. They must demonstrate compliance in 27 different criteria, which include:

- Assurances that pharmacists are practicing in accordance with recognized Canadian standards and laws;
- Patient safety safeguards;
- Meaningful consultation with patients; and
- Processes to inform patients of drug recalls.

For more information on VIPPS Canada, including a list of certified online pharmacies and to report suspicious online operations, visit www.napra.ca. For information on NABP’s VIPPS program, visit www.nabp.net. NABP
Four doctors have been reprimanded by the College of Physicians and Surgeons of Manitoba for cosigning prescriptions for patients in the United States who purchase medications through the Internet. The doctors are not suspended from practicing, but the public discipline will be on their records permanently.

Americans who use Internet pharmacies to purchase prescription medications from Canada must have their prescriptions cosigned by Canadian doctors if they were originally written by a US doctor. This is in violation of the College’s prescribing convention that requires doctors to physically examine patients before a prescription is written.

According to The Globe and Mail, a newspaper based in Toronto, Ontario, Canada, the doctors were censured on September 15, 2003. The Ontario College of Pharmacists discovered the doctors’ actions while it was reviewing prescriptions filled by Manitoban pharmacies.

The doctors have ceased cosigning prescriptions, the College’s registrar told the Globe, but if they begin such practices again they could face more severe penalties.
Never Gonna Let You Go, Gonna Hold You to This Debt Forever

By Dale J. Atkinson, JD

Through the authority set forth in the practice acts, regulatory boards protect the public by “regulating” a particular profession. Eligibility for initial licensure and maintenance of licensure through a renewal procedure can be dependant upon candidates continuing to meet certain qualifications. Many jurisdictions have certain social legislation, which requires applicants and licensees to remain in “good standing” on student loans, alimony, child support, and state and local tax obligations as a condition precedent to licensure. While this column usually addresses administrative law cases, sometimes various other legal precedents may be of interest to NABP Newsletter readers. Consider the following.

An individual was treated for alcoholism from ages 23 through 25, including several inpatient stays at hospitals, transitional living arrangements and counseling, and lengthy stays in at least two halfway houses. Thereafter, she remained sober for approximately 12 years, during which time she pursued her nursing education. After completing her educational requirements and substantiating other qualifications under the applicable statutes in Louisiana, she was licensed as a nurse and pursued her career in various employment settings under her license.

In 1997, she self-reported a relapse to the Louisiana Board of Nursing and entered the Recovering Nurses Program. As a result, her license to practice nursing was suspended. Based upon her successful participation in the Recovering Nurses Program, she applied for reinstatement of her license. Her application for reinstatement was granted subject to probationary restrictions for five years from the date of reinstatement. Under the restrictions, the nurse was not permitted to accept supervisory nursing positions and was required to work under the constant supervision of a registered nurse. She was also prohibited from working overtime, nights, or in “high-stress” areas. As a result of these limitations, the job opportunities for the nurse were limited and she eventually petitioned for bankruptcy under the applicable statutes.

As part of the petition, the nurse sought to have the student loans from her nursing education discharged in bankruptcy. These loans were originally held by Sallie Mae, guaranteed by the United States Student Aid Funds, Inc, and totaled approximately $50,000. As a debtor, the nurse filed an adversary proceeding seeking to have her student loans discharged under an “undue hardship” exception to the rule that student loans are not dischargeable in bankruptcy. Thus, the court was faced with a licensed nurse as a debtor with outstanding student loans and the impact of the Bankruptcy Code on the nurse with a limited license due to her alcoholism.

The bankruptcy court first addressed the rule that debts from “an educational benefit overpayment or loan made, insured or guaranteed by a governmental unit, or made under any program funded in whole or in part by a governmental unit or nonprofit institution” are exempt from discharge under the bankruptcy code. This exemption from discharge is, however, subject to an exception whereby the debtor carries the burden of establishing that applying the rule “will impose an undue hardship on the debtor and the debtor’s dependents.”

The Bankruptcy Code does not define undue hardship and, thus, the court borrowed from a previous judicial decision and applied the following three-part test to the determination.

1. That the debtor cannot maintain, based upon
current income and expenses, a minimal standard of living for herself and her dependents if forced to repay the loans;

2. That additional circumstances exist indicating that this state of affairs is likely to persist for a significant portion of the repayment period of the student loans; and

3. That the debtor has made good-faith efforts to repay the loans.

The court undertook a detailed analysis of these factors to consider and determined that the nurse did not qualify for the exemption and, thus, her student loan obligations would not be discharged by the court. In its analysis, the court held that although the nurse met the first test of maintenance of a minimal standard of living, she could not meet the second test regarding persistence of a state of affairs that would persist throughout the repayment period. Specifically, the court held that the limitations placed upon her license by the Board of Nursing were temporary in nature; that is, for a period of probationary years. The court noted that the nurse did not present any evidence of any impediments on her future career advancements. The court stated:

Discharge of student loans is inappropriate “where a debtor is apparently healthy, presumably intelligent and well-educated, and shows no evidence of extraordinary burdens which would impair further employment prospects,” even if a debtor can show a current inability to meet minimum expenses or find gainful employment.

The court noted the expert testimony that the nurse was projected to earn significantly more money upon the removal of the restrictions on her license. The court was also persuaded by a previous judicial opinion that held that the chance of relapse was not enough to warrant the discharge of student loans once the debtor was able to work. Finally, the court rejected any notion that the Bankruptcy Code allowed a partial discharge of such indebtedness. Accordingly, the court held that the nurse did not meet the hardship test and would not be discharged from her student loans.

Several interesting questions can be raised by the facts and opinion posed above. First, should, or at what point do, educational institutions assist students in determining if graduation will lead to licensure (assuming successful completion of the licensure examination)? Would treatment for an alcohol/drug addiction be considered by the school in the admissions process? Can such inquiries be made under the Americans with Disabilities Act or applicable confidentiality laws? Would previous addiction treatment be a prohibition, in and of itself, to licensure as a pharmacist? How do such facts impact the licensure renewal process? And, finally, will nonpayment of her student loans lead to an independent administrative disciplinary action against her license by the board of pharmacy? All such inquiries may be relevant to the boards of pharmacy in determining licensure eligibility and renewal.

This ruling by the bankruptcy court may be instructive to boards of pharmacy as well as attorneys for licensees when negotiating final orders and consent agreements. Attorneys for licensees may argue the impact of restrictive licenses on employment opportunities when determining the length of any such probationary periods. Be prepared. Boards may also want to reexamine the applications for licensure and renewal.

Roach v United Student Aid Fund, Inc 288 B.R. 437 (E.D. Louisiana 2003) NABP

Attorney Dale J. Atkinson is a partner in the law firm of Atkinson & Atkinson, counsel for NABP.
Illinois Releases Importation Study; NABP, FDA Question Credibility

(continued from page 3)

pharmacies for dispensing or distribution to US patients. Before the implementation of an inter-border regulatory framework it is essential that FDA and Health Canada establish a means for mutual recognition of drug products.

“Allowing for the purchase and import of drugs from other countries essentially abolishes the FDA’s drug approval process and circumvents state regulation,” Catizone adds.

“Advocating that it is acceptable to violate federal and state laws because the price of pharmaceuticals is high creates the opportunity for unscrupulous and dangerous individuals to operate Web sites or distribution enterprises that will ship drugs to US patients that may be nothing more than placebos, wrong, inappropriate, or even counterfeit.”

Blagojevich has said that an importation program will not be developed for the state of Illinois without the approval of FDA and the US Department of Health and Human Services (HHS) or until current laws change.

Other Governors Planning Importation Programs

Illinois is not the only state pressuring HHS and FDA to change their stance. Minnesota Governor Tim Pawlenty and Iowa Governor Tom Vilsack are also attempting to help residents and state employees gain access to Canadian prescription drugs.

Governor Pawlenty outlined his plan in testimony to the [US] Congressional Prescrip-

tion Drug Access Coalition on October 28, 2003. The plan consists of launching a Web site that lists Canadian pharmacies “that meet Minnesota’s standards for safety.” The state will have negotiated with these online pharmacies, which will be selected by the Minnesota Department of Human Services, to provide discounted prices on maintenance medications. The governor’s plan also calls for development of a distribution system allowing Minnesotans to purchase imported drugs through their local pharmacy or via an online pharmacy. However, according to the governor, certain prescription drugs will be excluded from the program, including controlled sub-
stances such as narcotics, drugs with special handling requirements such as insulin, and drugs needed immediately such as most antibiotics.

Another state that plans to create a program that imports prescription drugs from Canada for state employees is Iowa. Governor Tom Vilsack recently sent his top health care adviser to meet with Canadian officials to discuss importation. According to the Washington Post, state officials say Iowa spent $54 million on drugs for 70,000 employees, retirees, and their families in 2003. This is up from $44.5 million in 2001.

The first government to implement a formal plan for purchasing prescription medications from Canada was that of Springfield, MA. Despite FDA’s warnings, Mayor Michael Albano continues to use Canadian pharmacies as the source of prescription drugs for state employees. And now, Boston’s mayor plans to implement a similar plan in July 2004.

But even these carefully planned, government-sponsored programs may not be able to adequately ensure the safety of patients obtaining prescription drugs from other countries. As the number of patients who purchase drugs from international sources increases, so do the chances for patients to receive, and even be harmed by, counterfeit drugs. NABP
Study Reports Mail-order Prescription Drugs for Chronic Patients on the Rise

According to a July 22, 2003 Ipsos PharmTrends, the number of mail-order prescriptions to treat chronic conditions has increased 88% over the last five years, a higher growth rate than that of prescriptions purchased from conventional brick-and-mortar pharmacies including chain drug stores (27% growth), grocery stores (33% growth), and even discount stores (63% growth).

Due to the constant need for prescription drugs for chronic conditions, patients have been directed to purchase these prescriptions through mail-order pharmacies by insurance plans that allow patients to receive a 90-day supply of the medication under one insurance copayment as opposed to the normal 30-day supply approved for conventional pharmacies. In many cases, the insurance plans own the mail-order pharmacies. Examples of pharmacy benefit managers (PBMs) that also operate mail-order pharmacies are Caremark, Medco Health Solutions, AdvancePCS, and ExpressScripts.

In 2002, chronic disease medications accounted for half of the total United States prescription medication volume (49%) and out-of-pocket dollars (53%) spent by consumers. Rising prescription costs and today’s unstable economy may be reasons why patients are taking advantage of the money and time-saving alternative of ordering prescriptions via mail to maintain their treatment, according to the PharmTrends article. Fariba Zamianny, vice president and spokesperson for Ipsos PharmTrends, stated, “The rising cost of health care, specifically prescription drugs, is top of mind for sufferers of chronic ailments. . . . This has placed financial pressure on consumers as well as insurers to maintain therapy. Mail order helps offset this financial burden.”

Many PBMs have encouraged the use of these mail-order services; this PBM push occurs at a time when patients, insurers, and manufacturers have been forced to respond to the rising cost of branded drugs. Managed care companies have moved these branded prescription drugs to higher insurance copayment tiers, increasing the out-of-pocket expense to patients. Zamianny states in PharmTrends, “…[M]ail order services are able to provide discounts for these branded drugs. . . . As more consumers are shifted toward home delivery and one-stop shopping, we should expect to see the landscape of pharmaceutical purchasing to continue changing.”

But, Douglas Hoey, senior vice president – practice affairs of the National Community Pharmacists Association (NCPA), stated “Many entities, including national newspapers and federal governments, are calling into question the practices of some of these large mail-order houses. Additionally, one of the reasons we [NCPA] are very concerned about the forced rise in mail-order prescriptions is because of the many patient safety issues involved.”

These key issues include:

- Are the pharmacists who dispense these prescriptions licensed in the state in which the patient lives?
- Has the product been adulterated during transit?

Hoey also adds that one of the main reasons behind the rise in mail orders, and another concern, is that patients have been economically coerced either by their employer or health care plan to purchase prescriptions via mail order because they will receive more medication or a lower copayment. However, Hoey notes that without this persuasion patients still prefer seeing a pharmacist rather than receiving the prescription via mail-order.

Currently, NABP is researching the feasibility of expanding the Verified Internet Pharmacy Practice Sites™ (VIPPS®) program to include mail-order pharmacies. This expansion of the VIPPS program would include verifying legitimacy and performing regular inspections at facilities offering mail-order prescriptions. NABP
Chicago: The First City of NABP

Chicago may be referred to as “The Second City,” but for those of us who call “The Windy City” home, the city is number one when it comes to museums, arts and entertainment venues, restaurants, and other cultural and tourist attractions. NABP has called Chicago home for 100 years and invites its members to the Association’s 100th Annual Meeting and Centennial Celebration, April 24-27, 2004, at The Fairmont Chicago.

Was It the Cow?

Everyone knows the story of Mrs Catherine O’Leary and her infamous cow, who supposedly started The Great Chicago Fire on October 8, 1871. The fire charred much of the city and left the Water Tower and the Water Tower Pumping Station as the only standing building. The Water Tower Pumping Station still stands – and can now be toured among the glamorous stores and boutiques on Michigan Avenue, or “The Magnificent Mile,” as it is also called. After the rubble was cleared, The Great Chicago Fire had claimed 300 lives, left 90,000 Chicagoans homeless, and destroyed $200 million worth of property. Despite this disaster, Chicago used this opportunity to rebuild and double in population every decade thereafter.

Chicago’s skyline is one of the most famous in the world not only for having the world’s tallest building, but also for its scenic location along Lake Michigan.

Chicago’s first permanent settler, Jean Baptiste Point du Sable from Haiti, settled at the mouth of the Chicago River east of the present Michigan Avenue on the north bank in 1779. However, it was not until March 4, 1837, that Chicago was incorporated as a city with a population of 4,170.

The city has seen many ups and downs throughout the years and has been the host of many “firsts.” Montgomery Ward was established as the country’s first mail-order business in Chicago in 1872.

In order to accommodate the transportation needs of visitors of the World’s Columbian Exposition, the first elevated trains, or the “L,” were constructed. In 1893, just 22 years after The Great Chicago Fire, the city hosted the Exposition that attracted 26 million visitors during its six-month run.

Unique to Chicago

During the “Roaring Twenties,” Chicago gained a notorious reputation for when “Tommy guns,” ruled the Prohibition Era with such gangsters as Al Capone and Bugsy Moran. In 1943, Chicago Cubs owner and gum manufacturer Phillip K. Wrigley founded the All-American Girls Baseball League (AAGBL) due to the concern over whether or not the nation’s pastime would survive World War II. The AAGBL operated until 1945 and, during its peak, played in 10 cities and drew nearly a million fans.

A Treasure Trove of Culture and Fun

No trip to “The City of Big Shoulders” is complete without taking a stroll down “The Magnificent Mile,” just north of the Fairmont Chicago. This famous street is the place to shop and home to department stores like Marshall Field’s, Nieman Marcus, Saks Fifth Avenue, Nordstrom, and Bloomingdale’s. The Museum of Contemporary Art and the Terra Museum of American Art also call Michigan Avenue...

(continued on page 10)
April 24-27, 2004

**Saturday, April 24**
9 AM - 6 PM
Registration Desk Open
1 - 2:30 PM
Public Board Member Session
(Subject to advance registration of at least 10 public members.)
1 - 5 PM
Educational Presentation Area/Poster Session/Hospitality Suite Open
2:45 - 4:45 PM
New Member Seminar
7 - 10 PM
President’s Welcome Reception at the Art Institute of Chicago

**Sunday, April 25**
7:30 AM - 4:30 PM
Registration Desk Open
8 - 8:30 AM
First Business Session
8 - 9 AM
Continental Breakfast
8:30 - 11:30 AM
Meeting of the Nominating Committee
Meeting of the Committee on Resolutions
8 AM - noon
Educational Presentation Area/Poster Session
1 - 1:15 PM
Welcome Remarks
1:15 - 2 PM
Keynote Address
2 - 2:30 PM
Refreshment Break
2:30 - 5 PM
Second Business Session

**Monday, April 26**
7 - 11:30 AM
Registration Desk Open
7 - 8 AM
NABP/USP Breakfast
Sponsored by the United States Pharmacopeia, Inc
8 - 11:30 AM
Meeting of the Committee on Resolutions

**Tuesday, April 27**
9 - 11:30 AM
Optional Spouse/Guest Tour
Chicago Highlights Tour
9 - 10:30 AM
Joint CE Programming
10:30 - 11:30 AM
Open Mike Session
11:30 AM - 1:30 PM
Lunch Break
1:30 - 4:30 PM
Final Business Session
2:30 - 2:45 PM
Refreshment Break
7 - 11:30 PM
Annual Awards Dinner and Dance

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**Chicago Facts**

Site of NABP's Centennial Celebration
April 24-27, 2004

It was a quiet January for Chicago's residents in 1967. Until the 26th, that is. On that day, “Mother Nature unleashed her wrath... with a blizzard that would last over two days.” When it was over, two feet of snow covered and crippled the city. The Blizzard of '67, pictured at right, is still the worst snowfall in the history of Chicago weather, followed closely by the Blizzard of '79, which, on January 12 of that year, poured 20.5 inches of snow onto a city already recovering from a treacherous snowstorm from New Year's Eve 1978. Combined with the New Year's Eve storm, the Blizzard of '79 set a record for total snow on the ground: 27.5 to 30.5 inches. (Source: Historic Chicago Snowstorms - [http://members.aol.com/windgusts/Chicago.html](http://members.aol.com/windgusts/Chicago.html))

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**The Fairmont Chicago**

Meeting of the Nominating Committee
8:30 - 10 AM
Executive Officer and Board Member Programming
Compliance Officer Programming
Pharmacy Practice Programming
10 - 10:15 AM
Refreshment Break
10:15 - 12:15 AM
Executive Officer and Board Member Programming
Compliance Officer Programming
Pharmacy Practice Programming
12:15 - 12:30 PM
Refreshments
12:30 - 1:30 PM
Third Business Session

**Chicago, IL**

9 - 11:30 AM
Optional Spouse/Guest Tour
Chicago Highlights Tour
9 - 10:30 AM
Joint CE Programming
10:30 - 11:30 AM
Open Mike Session
11:30 AM - 1:30 PM
Lunch Break
1:30 - 4:30 PM
Final Business Session
2:30 - 2:45 PM
Refreshment Break
7 - 11:30 PM
Annual Awards Dinner and Dance

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NABP and the NABP Foundation are approved by the Accreditation Council on Pharmacy Education (ACPE) as providers for continuing pharmaceutical education. ACPE Provider Number: 205. Participants may earn up to 5 hours of ACPE-approved continuing education credit from NABP. Participants in continuing pharmaceutical education programs will receive credit by completing a “Statement of Continuing Pharmaceutical Education Participation” and submitting it to the NABP office. A validated Statement will be sent as proof of participation within approximately six weeks. Full attendance and completion of a program evaluation form for each session are required to receive continuing pharmaceutical education credit and a Statement of Participation.

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JANUARY 2004
home. There are also several theaters located nearby. The critically acclaimed Chicago Shakespeare Theater on Navy Pier will be presenting *King John*, the tale of the monarch known from the legend of Robin Hood, during the time of the 100th Annual Meeting. The legendary comedy company, The Second City, Inc, is also in the vicinity as is the Lookingglass Theatre Company, which was co-founded by *Friends* star David Schwimmer.

Chicago also boasts many world-class museums, including The Art Institute, which is the site of the 100th Annual Meeting’s President’s Welcome Reception on Saturday, April 24, 2004. The President’s Welcome Reception allows attendees to meet and catch up with other board members and it honors NABP President Donna S. Wall. The Art Institute houses more than 300,000 works of art. Some of the most famous pieces include *A Saturday Afternoon on La Grande Jatte* – 1884 by George Surat, *Nighthawks* by Edward Hopper, and 33 Claude Monet paintings. Two special exhibits during the time of the Annual Meeting focus on the works of Margherita Manzelli and Rembrandt van Rijn. The recommended donation is $10; some exhibitions require a timed ticket, which is a separately-paid ticket for a specific date and time to enter an exhibit. Tuesdays are free at The Art Institute.

Located on the Museum Campus, along with the Adler Planetarium and Astronomy Museum and the John G. Shedd Aquarium, is the Field Museum, the home of Sue, the world’s largest, most complete, and most preserved Tyrannosaurus rex. The Field Museum’s permanent exhibits offer something for everyone – from displays on Africa to animal biology, from bird habitats to the Bushman. Temporary exhibits that will be open for Annual Meeting attendees to experience include *The Natural Wonders of Madagascar: Photographs of Harald Schütz*, *Splendors of China’s Forbidden City: The Glorious Reign of Emperor Qianlong*, and *Jacqueline Kennedy: The White House Years – Selections From the John F. Kennedy Library and Museum*. Regular museum hours are 9 AM to 5 PM and basic admission is $10. The special temporary exhibits require a separate timed ticket.

**Getting Around the City**

The Chicago Transit Authority (CTA) offers quick, direct trains from both O’Hare International Airport and Midway Airport to downtown as well as expedient bus and train lines to major tourist attractions. A one-ride fare costs $1.75. Visitor Passes are the best value for out-of-towners with a one-day pass ($5), two-day pass ($9), three-day ($12), and five-day ($18). These passes allow unlimited rides on buses and trains and can be purchased at both airports, visitor information centers, Union Station, and select Chicago attractions. Free trolleys run on four routes that connect downtown CTA and Metra train stations to the Art Institute and Museum Campus, State Street, Michigan Avenue, and Navy Pier. Trolleys run every 30 minutes on Saturdays from 10 AM to 6 PM and on Sundays from noon to 6 PM.

The above mentioned events and attractions are only a select few things to take advantage of while in Chicago. For more information, look for NABP’s Chicago Tourism Guide for spouses and guests in the mail February 2004. For more information about the 100th Annual Meeting, please call the NABP Meetings Desk at 847/698-6227 or visit NABP’s Web site located at www.nabp.net.
Call for Testing Program Item Writers

Calling all pharmacy practitioners, educators, and regulators! Item writers are needed for NABP’s North American Pharmacist Licensure Examination™ (NAPLEX™), Multistate Pharmacy Jurisprudence Examination® (MPJE®), and Disease State Management (DSM) examinations. Those interested in serving should send or fax a letter of interest and a current resume or curriculum vitae to NABP’s Executive Director/Secretary, Carmen A. Catizone, at 700 Busse Highway, Park Ridge, IL 60068; fax 847/698-0124.

Item writers will receive training materials describing the skills necessary for their designated examination, and may be asked to attend a weekend workshop at NABP Headquarters or an area hotel, with applicable expenses paid by NABP. Periodically, item writers will receive requests to develop new test items that will be considered for inclusion in NABP’s competency assessment programs.

State board of pharmacy members and staff are particularly encouraged to participate in the item-writing process. For more information about item writing, contact the Competency Assessment Department at 847/698-6227.

Call for State Board News and Compliance News Contributors

NABP is seeking state board member and compliance officer correspondents for the “State Board News” and “Compliance News” columns that alternate running every other month in the NABP Newsletter. “State Board News” articles usually focus on the implementation of new board programs and their results. The “Compliance News” column features topics such as drug diversion scams, prescription forgery problems, and inspector-training programs.

If you would like to serve as a correspondent or contribute article ideas, contact the Communications Department at NABP Headquarters, 847/698-6227, or at custserv@nabp.net.

Participants of last year’s NAPLEX/MPJE Item Writing Workshop listen to guidelines at the three-day conference held January 10-12, 2003, in Rosemont, IL.
Join Us for NABP’s 100th Anniversary and Centennial Celebration

Where: The Fairmont Chicago, Chicago, IL
When: April 24-27, 2004

Through April 2004, the NABP Newsletter will feature the “NABP Centennial Capsule” that will highlight notable events in NABP’s 100-year history.

1991 – Licensure transfer fee increases from $125 to $150. An electronic version of the National Association of Boards of Pharmacy Licensure Examination (NABPLEX) Candidate’s Review Guide is developed and ready for implementation.

1992 – NABP moves from its 1300 Higgins Rd location in Park Ridge, IL, to its current building at 700 Busse Hwy, also in Park Ridge. The Association develops the Pharmacy Patient’s Bill of Rights. NABP processes 4,620 licensure transfer applications.

1993 – The Foreign Pharmacy Graduate Equivalency Examination® (FPGEE®) Program is no longer managed by an external testing contractor, but is coordinated by a staff of professionals in-house. NABPLAW®, NABP’s computerized databank of all state pharmacy practice acts, rules, regulations, and applicable key attorney general opinions, was launched during the Association’s 89th Annual Meeting, held May 22-26, in Baltimore, MD. NABP partners with the International Pharmaceutical Federation to host the First International Conference on Pharmaceutical Competence, held November 10-12 in Amsterdam, the Netherlands.

1994 – The Foreign Pharmacy Graduate Examination Committee™ (FPGEC®) Certification Program continues to grow with 1,350 applications reaching NABP Headquarters before the 1994 application deadline; this is up from 1,184 applications in 1993. The NABP Transfer of Pharmaceutic Licensure® application fee increases from $150 to $250 for each state in which an applicant wishes to become licensed. Also, reciprocity fees for a change in state or a time extension increase fees from $25 to $50 per change or extension.

1995 – State pharmacy boards get a preliminary look at the NABP Electronic Licensure Transfer Program®. NABP begins work on converting the NABPLEX from a paper-and-pencil examination to a computerized adaptive test. The Association receives 4,741 licensure transfer applications.
NABP Announces Annual Meeting Travel Grant Program

Is your state board of pharmacy having difficulty financing attendance to NABP’s 100th Annual Meeting and Centennial Celebration? If so, your board may be eligible for assistance from NABP’s new Annual Meeting Travel Grant Program for member board of pharmacy voting delegates. NABP believes Annual Meeting attendance to be of high importance, for it is at this time that Association resolutions and executive committee members are voted upon and information on current issues facing pharmacy regulators are presented and discussed.

NABP realizes that budget constraints can prevent state boards of pharmacy from sending representatives to meetings, so the Annual Meeting Travel Grant Program will reimburse the board’s official delegate up to $750 in travel fees to defray expenses such as air fare, hotel rooms, meals, taxis, parking, and tips. Monies are limited and grants are available on a first-come, first-serve basis. Grants are only available to those boards of pharmacy that are not reimbursed for travel expenses by the state.

To apply for an Annual Meeting Travel Grant, the official delegate must complete an application and submit documentation that their state will not provide financial reimbursement for Annual Meeting attendance. This can be in the form of a per diem or travel policy, or a letter stating that the state will not reimburse the board of pharmacy for expenses incurred by attending NABP’s Annual Meeting.

Please note that grant monies cannot be applied to Annual Meeting registration fees.

Details of the Travel Grant Program, including application deadlines, were sent to executive officers and members in late December 2003. Please note that NABP’s travel reimbursement policy allots $75 for meals each day. In addition, plane tickets must be purchased through Options Travel, NABP’s designated travel agency. The Program will be in effect until grant funds are exhausted.

For more information and to obtain an application, please contact the Executive Office at 847/698-2612 or via e-mail at exec-office@nabp.net. Materials should be sent to 700 Busse Hwy, Park Ridge, IL 60068.

September 2003 Executive Committee Highlights

During its September 13, 2003 meeting, NABP’s Executive Committee (EC) discussed and took action on the following items.

ACPE Appointment
The EC approved the six-year appointment of Donald H. Williams, executive director of the Washington State Board of Pharmacy, as the NABP appointee to the Board of Directors of the Accreditation Council for Pharmacy Education.

Pre-FPGEE Fee Set
The EC approved the recommended fee of $50 per attempt for the Pre-FPGEE™, the practice examination for the Foreign Pharmacy Graduate Equivalency Examination®. The Web-based Pre-FPGEE was launched on September 30, 2003.

Patient Safety Initiative
The EC approved the authorization of staff to proceed with the preparation of a final action plan, which will include an outline for funding the patient safety initiative.

Staff was further authorized to secure the staff necessary to begin the initiative and organize a symposium.

CCP Membership
NABP President Donna S. Wall attended the Council on Credentialing in Pharmacy’s (CCP) meeting on August 19, 2003. The Executive Committee felt it was important for NABP to be a part of the process and to be aware of the discussions occurring within this group. A motion to join CCP was passed.
NABP’s 100th Annual Meeting Poster Session Approaching

NABP’s 100th Annual Meeting and Centennial Celebration is approaching fast, so make time to develop a topic or use an encore presentation for the Second Annual Poster Session. Share ideas about your best or most noteworthy legislative issues, policy development, or disciplinary cases. Or, present research results from studies performed by your board. The poster session will be open Saturday, April 24, 2004, from 1 to 5 p.m. and Sunday, April 25, from 8 a.m. to noon, in the Educational Presentation Area of NABP’s 100th Annual Meeting and Centennial Celebration that will be held April 24-27, 2004, at The Fairmont Chicago.

NABP’s first ever poster session took place at the 99th Annual Meeting in Philadelphia, PA, where eight state boards of pharmacy displayed information on topics ranging from delegated dispensing and signs written in Spanish informing Spanish-speaking patients on how they can obtain their prescription information, to a demonstration of an electronic inspection reporting system and advances in telepharmacy.

To reserve space for the poster session, please contact the NABP Meetings Desk by Monday, March 1, 2004, and inform the meeting planner of the topic you will be displaying. Also, if your board is interested in displaying on only one day, please inform the NABP Meetings Desk.

Thinking about participating but are not sure where to start? The following tips on preparing a poster should help.

■ Limit text and utilize graphics; make sure all items on poster are necessary for the presentation.

■ Prepare handouts to provide an overview of the poster and/or additional information, including contact names, should attendees have questions.

■ Keep your poster title short, highlighting the topic.

■ Make the font size at least 14 point and double-space paragraph lines to ensure readability from two to four feet.

■ Arrange the sections in a logical order so that the poster is not difficult to follow. Rather than affixing your documents to one large piece of poster board which can cause a strain on poster pins, break your materials into three or four sections. You will also be able to move the sections around on the board at the Annual Meeting.

■ Enlist the help of students on rotation in your office to prepare the poster.

Each participating board will be provided with one four-foot by six-foot bulletin board, which should be manned by a board-appointed representative during display times. For more information, contact the NABP Meetings Desk via e-mail at custserv@nabp.net or via phone at 847/698-6227.

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Deadlines Set for Advance Distribution of Proposed Resolutions

NABP is continuing the procedure established in 1996 that allows for early distribution of proposed resolutions and permitting boards of pharmacy to review the resolutions prior to the Annual Meeting.

Proposed resolutions received at NABP Headquarters by March 15, 2004, to be presented and voted upon during NABP’s 100th Annual Meeting and Centennial Celebration, April 24-27, 2004, at The Fairmont Chicago, will be distributed to the boards of pharmacy on March 26, 2004, for review prior to the meeting. This mailing will constitute the only pre-conference distribution of proposed resolutions. All resolutions – those distributed for early review as well as those received after March 15 – will be presented to the delegates during the Annual Meeting on Monday, April 26, 2004, by the chair of the Committee on Resolutions.

To be considered during the Annual Meeting, resolutions must adhere to the requirements of Article IV, Section 6, Part (d) of the NABP Constitution, which states:

Any active member board, district, or committee of the Association may

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Deadlines Set for Advance Distribution of Proposed Resolutions

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submit resolutions to the Association. . . . [A]ll resolutions submitted in writing to the Association at least twenty (20) days prior to the date of the Annual Meeting shall be presented at the Annual Meeting for consideration.

Resolutions not presented within such time limitations may be presented during the Annual Meeting, and will be considered for adoption by the Association upon the affirmative vote of three-fourths (3/4) of those Association members present and constituting a quorum.

Questions regarding resolution procedures should be directed to NABP Executive Director/Secretary Carmen A. Catizone at NABP Headquarters by calling 847/698-6227 or e-mailing ceo@nabp.net. 

Washington Board Wins Survey of Pharmacy Law Luncheon Drawing

Congratulations to the Washington State Board of Pharmacy, winner of the 15th annual Survey of Pharmacy Law luncheon drawing.

Staff of the Washington State Board of Pharmacy enjoy a lunch after receiving a $125 award for being one of the first to return its Survey of Pharmacy Law revisions.

Law luncheon drawing. The Board was one of 25 boards of pharmacy to qualify for the drawing by returning its revised data for the Survey by the deadline.

The Board used its $125 award at a luncheon held October 28, 2003, at the El Sarape Restaurant in Tumwater, WA. During the lunch, the Board’s recent accomplishments were acknowledged. Those who attended included Executive Director Donald H. Williams, Richard D. Morrison, Lisa Salmi, Grant Chester, Melissa Quirke, Doreen Beebe, Cheryl Ackley, Georgia Sage, Susan Loutzenhiser, Steve Hodgson, James Doll, Chad Force, Cable Wolverton, and Tim S. Fuller.

Kentucky Board Names New Member

Gregory A. Naseman, RPh, has been appointed a member of the Kentucky Board of Pharmacy. He replaces Joe Carr.

New Board Web Addresses

- The North Dakota State Board of Pharmacy has changed its Web site address to www.nodakpharmacy.com.

2003 Bowl of Hygeia Recipients

Each year, state pharmacy associations bestow the Wyeth Bowl of Hygeia Award on those pharmacists who take active roles in the affairs of their communities. Congratulations to the recipients of this prestigious award.

- Robert J. Anselmo, RPh, member, Illinois Department of Professional Regulation – State Board of Pharmacy; and
- Beverly C. Mims, RPh, chairperson, District of Columbia Board of Pharmacy.

Ohio Board Extends Submission Deadline for Proposed Resolutions

The Ohio State Board of Pharmacy is extending the deadline for submitting proposed resolutions for consideration at the 2004 Annual Meeting.

Washington Board Wins Survey of Pharmacy Law Luncheon Drawing

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NABP Meeting Dates

Thursday-Friday, February 12-13, 2004
New Executive Officers Orientation Program
NABP Headquarters, Park Ridge, IL

Friday, March 12, 2004
Committee on Constitution and Bylaws Meeting
NABP Headquarters, Park Ridge, IL

Saturday-Tuesday, April 24-27, 2004
NABP’s 100th Annual Meeting and
Centennial Celebration
The Fairmont Chicago, Chicago, IL

Thursday-Sunday, November 11-14, 2004
NABP/ASPL Joint Fall Conference
Renaissance Vinoy Resort and Golf Club,
St Petersburg, FL